

## **Massachusetts Department of Environmental Protection**Bureau of Resource Protection - Wetlands



# WPA Form 1- Request for Determination of Applicability Massachusetts Wetlands Protection Act M.G.L. c. 131, §40

#### A. General Information

Important: When filling out forms on the computer, use only the tab key	1.	Applicant: Troy Knowles	Troya Knowles@GMA/. Co		
to move your cursor - do not use the return key.	2.	Mailing Address A SSONET City/Town 617 710 5026 Phone Number Representative (if any):	MA State Fax Number (if	02702 Zip Code	
		Firm  Contact Name  Mailing Address	E-Mail Address		
	),	City/Town  Phone Number	State Fax Number (if	Zip Code applicable)	
	B. Determinations  1. I request the TreTown Consciunt Commission  a. whether the area depicted on plan(s) and/or map(s) referenced below is an an jurisdiction of the Wetlands Protection Act.  b. whether the boundaries of resource area(s) depicted on plan(s) and/or map(s) below are accurately delineated.  c. whether the work depicted on plan(s) referenced below is subject to the Wetlands d. whether the area and/or work depicted on plan(s) referenced below is subject of any municipal wetlands ordinance or bylaw of:				
		Name of Municipality  e. whether the following scope of alternatives is adequed depicted on referenced plan(s).	uate for work in the	e Riverfront Area as	

C. Project Describito	ect Descriptio	ion
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1.	a.	Project Location	(use maps and	plans to identify	the location of	of the area subject	ct to this	request)
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53 High 57	ASSONET		
Street Address	City/Town		
215	10		

Assessors Map/Plat Number

Parcel/Lot Number

b. Area Description (use additional paper, if necessary):

Missed extension by one day place extend order of conditions for 3 years so I can difinitely finish product.

DEP File # SE 026-0602

c. Plan and/or Map Reference(s):

Title	Date
Title	Date
Title	Date

2. a. Work Description (use additional paper and/or provide plan(s) of work, if necessary):

#### C. Project Description (cont.)

b. Identify provisions of the Wetlands Protection Act or regulations which may exempt the applicant from having to file a Notice of Intent for all or part of the described work (use additional paper, if necessary).

3.		ion is a Request for Determination of Scope of Alternatives for work in the dicate the one classification below that best describes the project.
	☐ Single family i	nouse on a lot recorded on or before 8/1/96
	☐ Single family l	nouse on a lot recorded after 8/1/96
	☐ Expansion of	an existing structure on a lot recorded after 8/1/96
	Project, other before 8/7/96	than a single-family house or public project, where the applicant owned the lot
	☐ New agricultur	re or aquaculture project
	☐ Public project	where funds were appropriated prior to 8/7/96
		ot shown on an approved, definitive subdivision plan where there is a recorded deed ting total alteration of the Riverfront Area for the entire subdivision
	Residential su	bdivision; institutional, industrial, or commercial project
	☐ Municipal proj	ect
	☐ District, county	, state, or federal government project
	Environmental application for	ed to evaluate off-site alternatives in more than one municipality in an Impact Report under MEPA or in an alternatives analysis pursuant to an a 404 permit from the U.S. Army Corps of Engineers or 401 Water Quality om the Department of Environmental Protection.
		nce (e.g., record of date subdivision lot was recorded) supporting the classification nal paper and/or attach appropriate documents, if necessary.)

### D. Signatures and Submittal Requirements

I hereby certify under the penalties of perjury that the foregoing Request for Determination of Applicability and accompanying plans, documents, and supporting data are true and complete to the best of my knowledge.

I further certify that the property owner, if different from the applicant, and the appropriate DEP Regional Office were sent a complete copy of this Request (including all appropriate documentation) simultaneously with the submittal of this Request to the Conservation Commission.

Failure by the applicant to send copies in a timely manner may result in dismissal of the Request for Determination of Applicability.

FROY Knowles	
Name Troy Knowles	
Mailing Address 5 WeeTamse D	
City/Town Assont	
State MA	Zip Code 02702
Signatures:	
I also understand that notification of this Request in accordance with Section 10.05(3)(b)(1) of the	t will be placed in a local newspaper at my expense Wetlands Protection Act regulations.
12 pre	6 Mar 2022
Signature of Applicant	Date
Signature of Representative (if any)	Date

Name and address of the property owner: